FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
FORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL				
OMB Number:	3235-0076			
Expires:	November 30, 2001			
Estimated average burden				

SEC USE ONLY					
Prefix	Serial				
DATE F	RECEIVED				

hours per response 16.00

1186440						
Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Cramer Berkowitz Partners, L.P.						
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE						
Type of Filing: New Filing Amendment						
A. BASIC IDENTIFICATION DATA						
1. Enter the information requested about the issuer						
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)						
Cramer Berkowitz Partners, L.P. 03056828						
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number uncluding Area code)						
909 Third Avenue, 14th Floor New York, N.Y. 10022 212-940-0700						
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)						
(if different from Executive Offices)						
Brief Description of Business						
Hedge fund.						
Type of Business Organization other (please specify): PROCESSED						
corporation limited partnership, already formed						
□ business trust □ limited partnership, to be formed \ APR 23 2003						
Month Year						
Actual or Estimated Date of Incorporation or Organization: 2 87 🛮 Actual 🔲 Estimated IHOMSON						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada: EN for other foreign jurisdiction) DE						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities at Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on whi it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Avenue, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any chang thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix ne not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULO and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or his been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. To notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be complet

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal not will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (1799) 1. d

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Berkowitz Capital & Co., L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code) 909 Third Avenue, 14th Floor, New York, NY 10022 Check Box(es) that Apply: M Promoter Beneficial Owner TExecutive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Berkowitz, Jeffrey L. Business or Residence Address (Number and Street, City, State, Zip Code) 909 Third Avenue, 14th Floor, New York, NY 10022 Check Box(es) that Apply: □ Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) J. L. Berkowitz & Co., L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code) 909 Third Avenue, 14th Floor, New York, NY 10022 Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				B	. INFORM	IATION A	BOUT OFF	ERING				
نسب											Yes	No
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									\boxtimes			
2. What is the minimum investment that will be accepted from any individual?							\$	2,500,000				
3. Does the offering permit joint ownership of a single unit?								Yes	No			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of	Associated	Broker or D	ealer	·····\								
			as Solicited k individual									All State
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] {PR}
Full Nan	ne (Last nam	ne first, if in	dividual)									
Business of Residence Address (Number and Street, City, State, Zip Code)												
Name of	Associated	Broker or D	ealer				<u> </u>					
States in	Which Pers	on Listed H	as Solicited	or Intends to	o Solicit Pui	chasers		······································		·		
	(Check [All States□	or check in	dividual Sta	tes)		•••••					All State
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Nan	ne (Last nam	ne first, if in	dividual)									
Business of Residence Address (Number and Street, City, State, Zip Code)												
Name of Associated Broker or Dealer												
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check All States Or check individual States)												
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

	. C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	32 e, me ca22c		
	Type of Security	Aggregate Offering Price	Amount Already Sold	
	Debt	\$0	\$0	
	Equity	\$0	\$0	
	Common Preferred			
	Convertible Securities (including warrants)	\$ 0	\$ 0	
	Partnership Interests	\$ 8,368,333	\$ 8,368,333	
	Other (Specify)	\$ 0	\$ 0	
		s 92/9222	<u> </u>	
	Total	\$8,368,333_	\$ 8,368,333	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases	
	Accredited Investors	17	\$8,368,333	
	Non-accredited Investors	0	\$0	
	Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
	Type of offering	Type of Security	Dollar Amount Sold	
	Rule 505	N/A	\$N/A	
	Regulation A	N/A	\$N/A	
	Rule 504	N/A	\$N/A	
	Total	N/A	\$N/A	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		🔲 \$	
	Printing and Engraving Costs		. 🗆 \$	
	Legal Fees			
	Accounting Fees.		🔲 \$	

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Engineering Fees.

	. C. OFFERING PRICE	, NUMBER OF INVESTORS, EXPENSES AND US	SE OF PROCEEDS					
1	*			□ \$				
	Total			□ s <u>0</u>				
		regate offering price given in response to Part C - responses to Part C - Question 4.a. This difference						
	is the adjusted gross proceeds to the issue	-1.		\$ 8,368,333				
5.	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.							
			Payments to Officers, Directors, & Affiliates	Payments to Others				
	Salaries and fees		\$_0	<u> \$ </u>				
	Purchase of real estate		□ \$ <u>0</u>	S_0				
	Purchase, rental or leasing and installation	of machinery and equipment	\$_0	S_0				
	Construction or leasing of plant buildings a	\$ 0	S_0					
	Acquisition of other businesses (including may be used in exchange for the assets or s	S_0	S_0					
	Repayment of indebtedness	<u> </u>	□ \$ <u>0</u>					
	Working capital		S 0	□ s <u> </u>				
	Other (specify): <u>Investment Purposes</u>							
			□ \$ <u>0</u>	\$_8,368,333				
	Column Totals		S0	\$ 8,368,333				
	Total Payments Listed (column totals adde	d)	S 8,368,333					
		D. FEDERAL SIGNATURE						
signati	ire constitutes an undertaking by the issuer t	by the undersigned duly authorized person. If this no to furnish to the U.S. Securities and Exchange Commisted investor pursuant to paragraph (b)(2) of Rule 5	sion, upon written requ					
	(Print or Type) er Berkowitz Partners, L.P.	Signature ###	Date April 7, 2003					
	of Signer (Print or Type) L. Berkowitz	Tyrle of Signer (Print or Type) Managing Member of General Partner						
	ATTENTION							

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)